

K093912
MAR 18 2010

Arthrex TRADITIONAL 510(k): Arthrex Tibial GraftBolt

3 510(k) Summary of Safety and Effectiveness

Manufacturer/Distributor/Sponsor	Arthrex, Inc. 1370 Creekside Boulevard Naples, FL 34108-1945 USA
510(k) Contact	David D'Alessandro Quality Engineer Arthrex, Inc. 1370 Creekside Boulevard Naples, FL 34108-1945 USA Telephone: 239/643.5553, ext. 1117 Fax: 239/566.5851 Email: david.d'alessandro@arthrex.com
Trade Name	Arthrex Tibial GraftBolt
Common Name	Screw, Fixation, Bone
Product Code- Classification Name Regulation No.	MBI Smooth or threaded metallic bone fixation fastener 888.3040
Predicate Devices	K032167: Bio-Intrafix™ Tibial Screw and Sheath – Mitek Worldwide K083607: AperFix® Tibial Implant with Insertor – Cayenne Medical
Device Description and Intended Use	The Arthrex Tibial GraftBolt consists of a pre-packaged mating sheath and screw pair offered in three sizes. The Arthrex Tibial GraftBolt is intended to be used for fixation of tissue including ligament or tendon to bone and bone tendon during cruciate ligament reconstruction procedures.
Substantial Equivalence Summary	The Arthrex Tibial GraftBolt is substantially equivalent to the predicate devices in which the basic features and intended uses are very similar. Any differences between the Arthrex Tibial GraftBolt and the <i>predicate</i> devices are considered minor and do not raise questions concerning safety and effectiveness. Based on the information submitted, Arthrex, Inc. has determined that the Arthrex Tibial GraftBolt is substantially equivalent to the currently marketed predicate devices. similar



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
10903 New Hampshire Avenue
Document Control Room –WO66-G609
Silver Spring, MD 20993-0002

Arthrex, Inc.
% Mr. David D'Alessandro
Quality Assurance Engineer
1370 Creekside Boulevard
Naples, Florida 34108

MAR 18 2010

Re: K093912

Trade/Device Name: Arthrex Tibial GraftBolt
Regulation Number: 21 CFR 888.3040
Regulation Name: Smooth or threaded metallic bone fixation fastener
Regulatory Class: II
Product Code: MBI
Dated: December 17, 2009
Received: December 22, 2009

Dear Mr. D'Alessandro:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Mark N. Melkerson", written over a horizontal line.

Mark N. Melkerson
Director
Division of Surgical, Orthopedic,
and Restorative Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

2 Indications for Use Form

510(k) Number: K093912
Device Name: Arthrex Tibial GraftBolt

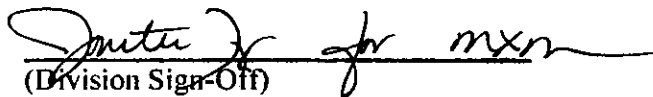
The *Arthrex Tibial GraftBolt* is intended to be used for fixation of tissue including ligament or tendon to bone and bone tendon during cruciate ligament reconstruction procedures.

Prescription Use X AND/OR Over-The-Counter Use _____
(Per 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

1 of 1


(Division Sign-Off)
Division of Surgical, Orthopedic,
and Restorative Devices

510(k) Number K093912